STATE OF LOUISIANA 010810

DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF STATE FIRE MARSHAL CODE ENFORCEMENT AND BUILDING SAFETY
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## FIRE ALARM SYSTEM REVIEW CHECKLIST & FEE SCHEDULE

As an aid to streamline our fire alarm system review process, we ask that you complete this checklist, and attach it to your Plan Review Application. Please address each checklist item in your package, whether the item is conveyed on the shop drawings, manufacturer cut sheets, general notes, pre-engineered data/calculations, or cover letter, etc. Any items not addressed may cause unnecessary delays or project "hold" on your review. Your help, up front, will facilitate a complete submittal package, shorten our review time, and help us to get your project reviewed and returned sooner. Please verify that each numbered item below is: A. in your submittal, B. correct, and C. is coordinated within the submittal (shop drawings match manufacturer's spec sheets, and battery calculations). Then provide a check mark adjacent to each numbered item, or print "N/A" for items not applicable to this submittal. Thank you for your help, in completing and coordinating the items in this checklist.

Please note that all items marked with an \* asterisk, govern mandatory rejection, provided they are missing, incomplete or incorrect in your submittal. These mandatory items have been reiterated from our February 1, 2000 memorandum entitled "Fire Alarm Submittal Review: Rejection List". Also, please note the following documents, which may be of help, when preparing your package for submittal:

Memorandum Memorandum	• •	Preliminary Fire Alarm Projects
Project Name	e (please print):	
Project Addre	ess:	Architectural Review No. P0
Checklist Cor	mpleted By:	Date:
PLAN REVIEW	W APPLICATION	
with ti "Deac "Dea	his fire alarm submittal. *TI dline Imposed" or "Informati architectural scope of work e/letter. fire alarm design is based of alarm work is resultant from of report. hittals shall be designed pur cants requesting reviews ur ct name, address, occupant of fire alarm system is denoted by drawings shall be reviewed	is exempt from a review by this office, then provide a copy of the exemption on an existing State Fire Marshal appeal letter, furnish copy. In an inspection (State Fire Marshal, sprinkler contractor, fire department, etc.), provide resuant to editions of NFPA 101 and NFPA 72 that are currently adopted in Louisiana. Inder alternate code editions shall provide written request, stating reasons for deviation, cy, and owner denoted on application, and matches that of architectural review. In other locations of the professional of record (when required), prior to submission.
10. * The prope	fire alarm contractor shall I	be licensed for the scope of work submitted. Examples: The contractor must be design and install fire alarm systems that are required by code. Contractor's license
11. Chec		ble to this submittal - Fire Alarm System, Voice Evac Required, New Building, part Finish. Shell Only, etc.
12. Fire A	Alarm System Type: Check on name and address as list	applicable box - Local, Auxiliary, Remote Station, Central Station (include Central ted in UL Directory).
14. * If a f	fire alarm system is require .g. component spacing/loca	check is attached (check may be made to "LADPS").  It discusses the NFPA 101, but contains non-conforming components pursuant to NFPA attached such as 3 smoke detectors in a room requiring 4, substitution of electors in lieu of smoke detectors, a partial system, etc.), the professional of record

(otherwise owner) shall provide specific documentation requesting these deviations from the code.

## SHOP DRAWINGS 1. Drawings are to be legible blueline prints, photocopies, or live computer plots (any live ink or pencil applied by hand is not acceptable), and all drawn to scale. 2. Professional of record shop drawing review stamp on the top sheet. \_ 3. Denote all door swings (to confirm smoke compartmentation), and all exits. \_\_ 4. Reflected ceilings are clearly denoted, including all ceiling heights, light fixture types/locations, HVAC opening types/locations, and all architectural features (joists, beams, coffers, furrs, etc,) extending more than 4 inches from the 5. \* Submittal must be complete. Examples: Candela ratings of strobes shall be identified. Ceiling heights shall be indicated when ceiling mounted strobes are used. Rooms, spaces and areas shall be identified. Battery calculations shall be provided. Manufacturer's spec sheets shall be provided. Provide brief description of the sequence of operations. Include all fire alarm system sequences that interact with other building systems (sprinkler, fire suppression, elevator recall, etc.). All components (initiating devices, notification appliances, transmission, annunciation, etc.), are clearly identified and located to scale (see 1., above). Denote all detector and strobe spacings. Indicate special initiation devices (delayed locks, sprinkler flow switches, elevator recall smoke detectors, etc.) 6. Differentiate between all existing and proposed components. If system or portion is existing, indicate date of existing system installation, or date of prior substantial system renovation. (All new work is reviewed pursuant to the currently adopted edition of NFPA 72. Replacements "in-kind" are pursuant to applicable NFPA 72 edition at time of construction, in accordance with LA RS 55:V:103.) 7. Denote all system zones (e.g. signal receiving zones, signal sending zones, fire wall compartments, zones per floor etc.). \_\_\_\_ 8. Riser diagram to indicate all zones and include all devices and components within each zone. 9. Provide symbol schedule (symbols to be consistent with shop drawings). Identify devices by generic names (not manufacturer's special names, unless specified). 10. \*Design must comply with code. Proper coverage shall be provided from strobes, heat detectors, or smoke detectors (20 to 25% of required devices must not be missing from shop drawings). 11. Designate type(s) of wire utilized, and color of insulation or other marking method, enabling SFM inspector to verify compatibility between shop drawings and field installation. \_\_12. Designate conduit type(s), and locate all riser/plenum runs. BATTERY CALCULATIONS FOR SECONDARY POWER SUPPLY 1. \* Calculations to be complete. Indicate all electric current required in supervision and alarm conditions. \_\_\_\_ 2. Provide calculations on battery manufacturer's standard form. Denote capacity of battery, and confirm adequate size when operating under the full-calculated load. MANUFACTURER'S SPEC SHEETS

2	2.	* Provide manufacturer's spec sheets for all system components and devices.
3	3.	Provide U.L. Fire Protection Equipment Directory, latest edition page copies, with each component and device
		highlighted. Verify that the U.L. listing as denoted on the spec sheets are identified in U.L. (If manufacturer has been
		bought out by another, please indicate such.)
∠	ŀ.	* Fire alarm control panel shall be listed for compatibility with all signals to be received. Examples: Whenever
		emergency forces notification or a supervised automatic sprinkler system is required by the code, the fire alarm control
		panel must be listed for this type service. Two-wire smoke detectors and some heat detectors are required to be
		compatible with the control panel.

\_ 1. Provide complete list of all system components and devices, with manufacturer and model numbers of each.

\_ 5. Verify that the fire alarm control panel is listed for compatibility with all signals to be received. For example,

6. Highlight applicable data on each sheet (if spec sheets contain erroneous information not applicable to this project).

\_\_\_\_ 7. Identify all option features.

## FEE CALCULATIONS

- 1. Devices limited to visual notification devices, system smoke detectors, and system heat detectors only.
- Money orders, cashier's checks, certified checks, and company checks accepted (no personal checks accepted, effective 9-1-00).

3. Fees include postage and handling.

ITEM				REVIEW FEE \$
Number of devices	1	-	25	\$75
Number of devices	26	-	50	\$105
Number of devices	51	-	75	\$135
Number of devices	76	-	100	\$165
Number of devices	101	-	above	\$165 + \$30 for each additional group of 1 to 25 devices over 100
Calculated fee attached				= TOTAL \$